HOUSE CONCURRENT RESOLUTION

REQUESTING THE DEPARTMENT OF PSYCHIATRY OF THE UNIVERSITY OF HAWAII AT MANOA TO CONVENE A MENTAL HEALTH ACCESS TASK FORCE AND REQUESTING THE AUDITOR TO COMPLETE A MENTAL HEALTH WORKFORCE ASSESSMENT.

WHEREAS, there is a shortage of physicians in the State, with shortages being even more pronounced on the neighbor islands; and

WHEREAS, there appears to be a pronounced shortage of primary care physicians, as well as physicians of all specialties on neighbor islands, including cardiologists, obstetricians and gynecologists, internists, psychiatrists, pediatricians, and neurologists, as well as physician extenders, such as advanced practice registered nurses with prescriptive authority and physician assistants, and allied mental health professionals, such as psychologists, social workers, marriage and family therapists, and other therapists, on the neighbor islands; and

WHEREAS, one proven solution to aid in addressing unmet medical needs on the neighbor islands is telemedicine and, with respect to psychiatric disease, telepsychiatry, which is currently finding increasing success in treating children with psychiatric disease on Hawaii and Maui, and which was supported by Act 159, Session Laws of Hawaii 2014; and

WHEREAS, there has been an increase in the number, complexity, and life-threatening side effects of medications used to treat brain disorders; and

WHEREAS, these side effects, including heart attacks and strokes, are of such concern that the United States Food and

Drug Administration ordered "black box warnings" on psychiatric medications; and

WHEREAS, these medications, while effective, can have bothersome, hazardous, and potentially lethal side effects involving both the body and the brain; and

WHEREAS, patients with severe psychiatric illnesses die twenty-five years younger than the rest of our community, not by suicide, but due to medical diseases, including diabetes, heart failure from high blood pressure, lung disease from cigarette smoking, stroke, and heart attacks, all of which can be made worse by medications prescribed to alleviate psychiatric disease; and

WHEREAS, the training and practice of psychiatrists has therefore become increasingly focused on dealing with the bodily consequences of psychiatric disease and the medications used to treat them, including such consequences as smoking, diabetes, stroke, heart attacks, and kidney failure, which are increasingly common in patients afflicted with schizophrenia, bipolar I disorder, and severe depression; and

WHEREAS, physician extenders, such as advanced practice registered nurses with prescriptive authority and physician assistants, by virtue of their biology, chemistry, physiology and medical-based training, are qualified to treat patients, under a physician's supervision, with medications for infections, high blood pressure, and diabetes, as well as the more moderate mood and anxiety disorders; and

WHEREAS, many health and brain disorders can be treated by social workers, family therapists, the clergy, and psychologists, using psychotherapy, including techniques like cognitive-behavioral therapy, and faith-based therapies, as well as a spectrum of other therapies; and

WHEREAS, there are numerous non-physician mental health care professionals trained to deliver psychological and spiritual therapies within the scope of their training and expertise, including doctoral level therapists, such as Ph.D. clinical, counseling, and school psychologists and Psy.D.

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clinical psychologists, as well as Master's degree level therapists, such as Masters of Social Work, marriage and family therapists, and mental health counselors, as well as other mental health counselors, including pastors, rabbis, Buddhist monks and priests, Shinto priests, and Muslim and other spiritual healers, who, through their non-pharmacological expertise, significantly help to heal psychiatric distress; and

WHEREAS, the training of all non-medically trained mental health care professionals, such as ministers and psychologists, have no overlap with the standard training required of medically trained health care professionals, such as advanced practice registered nurses with prescriptive authority and physician assistants; and

WHEREAS, the standard training required of medically trained health care professionals includes medical school prerequisite-level coursework in chemistry, biology, mathematics, microbiology, and other topics; and

WHEREAS, it has been suggested by proponents of legislation proposing to confer prescriptive authority to clinical psychologists that, under certain conditions, clinical psychologists may be qualified to prescribe medications; and

WHEREAS, this view is unjustified by the fact that psychologists are not required to complete the coursework in biology, chemistry, physiology, medicine, and the other sciences required of all other disciplines qualified to prescribe medication, including primary care physicians, psychiatrists, advanced practice registered nurses, advanced practice psychiatric nurses, and appropriately trained and supervised physician assistants; and

WHEREAS, these competing views need to be carefully examined; and

WHEREAS, it is in the interest of the health, safety, and well-being of the State to consider the appropriateness of conferring prescriptive authority to various health care professionals to treat mental illness in Hawaii; now, therefore,

BE IT RESOLVED by the House of Representatives of the Twenty-eighth Legislature of the State of Hawaii, Regular Session of 2015, the Senate concurring, that the Department of Psychiatry of the University of Hawaii at Manoa is requested to convene a Mental Health Access Task Force (Task Force) to develop recommendations:

1 2

(1) For the establishment of standards for psychiatric and mental health care in the State, with particular attention to the neighbor islands and rural areas;

(2) To increase access to psychiatrists; and

(3) Regarding how telemedicine and physician extenders, and the use of allied mental health care professionals, such as spiritual leaders, social workers, marriage and family therapists, mental health counselors, and psychologists, might improve access to the appropriate level of treatment by the appropriately designated discipline, be it spiritual healing, psychotherapy, or medication; and

BE IT FURTHER RESOLVED that the Legislature requests that the Task Force be assigned to the Department of Psychiatry of the University of Hawaii at Manoa for administrative purposes and make recommendations and propose legislation to improve access to mental health care; and

BE IT FURTHER RESOLVED that the Legislature requests that the Task Force be composed of:

(1) The Chairperson of the Department of Psychiatry of the University of Hawaii at Manoa, or the Chairperson's designee, who is requested to serve as the chairperson of the Task Force;

(2) The Director of Health, or the Director's designee;

(3) The Director of Human Services, or the Director's designee;

1 2 3 4	(4)	The Deputy Director of the Corrections Division of the Department of Public Safety, or the Deputy Director's designee;
5 6 7	(5)	A representative of the Insurance Commissioner who is familiar with issues of access to health care;
8 9 10	(6)	The Chairperson of the Senate Committee on Health, or the Chairperson's designee;
11 12 13	(7)	The Chairperson of the House Committee on Health, or the Chairperson's designee;
14 15 16	(8)	The Chairperson of the Senate Committee on Commerce and Consumer Protection, or the Chairperson's designee;
18 19 20	(9)	The Chairperson of the House Committee on Consumer Protection and Commerce, or the Chairperson's designee;
21 22 23 24	(10)	The Chairperson of the Senate Committee on Higher Education and the Arts, or the Chairperson's designee;
25 26 27	(11)	The Chairperson of the House Committee on Higher Education, or the Chairperson's designee;
28 29 30	(12)	The Chairperson of the Board of Directors of the Hawaii Health Systems Corporation, or the Chairperson's designee;
31 32 33 34	(13)	The Chief Executive Officer of Hawaii Medical Services Association, or the Chief Executive Officer's designee;
35 36 37	(14)	The President of Kaiser Permanente (Hawaii), or the President's designee;
38 39 10 11	(15)	A psychopharmacology expert, as designated by the Department of Psychiatry of the University of Hawaii at Manoa:

1 2 3	(16)	A psychology expert, as designated by the Department of Psychiatry of the University of Hawaii at Manoa;
4 5	(17)	A psychiatrist working in a community health center, as designated by the Hawaii Primary Care Association;
6 7 8	(18)	A psychiatrist working in a community mental health center, as designated by the Department of Health;
9 10 11 12 13	(19)	A psychiatric nurse practitioner, as designated by the School of Nursing and Dental Hygiene of the University of Hawaii at Manoa;
14 15 16	(20)	A Doctor of Pharmacy, as designated by the Daniel K. Inouye College of Pharmacy at the University of Hawaii at Hilo;
18 19 20	(21)	An expert in telepsychiatry, as designated by the Department of Psychiatry of Tripler Army Medical Center;
21 22 23 24	(22)	An expert in forensic psychiatry, as designated by the Hawaii Health Systems Corporation;
25 26 27	(23)	A psychiatric physician assistant, as designated by the Hawaii Medical Board;
28 29 30	(24)	A naturopathic physician, as designated by the Board of Naturopathic Medicine;
31 32 33 34	(25)	A licensed marriage and family therapist, as designated by the Director of Commerce and Consumer Affairs;
35 36 37	(26)	A licensed mental health counselor, as designated by the Department of Psychology of the University of Hawaii at Hilo;
38 39 40 41	(27)	A psychiatry resident, as designated by the Department of Psychiatry of the University of Hawaii at Manoa;

- 1 (28) A doctoral candidate of the psychology Ph.D. degree 2 program, as designated by the Department of Psychology 3 of the University of Hawaii at Manoa;
 - (29) A patient with a diagnosis of schizophrenia for a minimum of five years who is currently receiving treatment, including antipsychotic medication, and residing on the island of Oahu, as designated by the Hawaii Health Systems Corporation;
 - (30) A patient with a diagnosis of bipolar disorder for a minimum of five years who is currently receiving treatment, including mood stabilizing medication, such as Lithium, Depakote, or both, and residing on the island of Oahu, as designated by the Hawaii Health Systems Corporation; and
 - (31) A patient with a diagnosis of severe depression for a minimum of five years who is currently receiving treatment, including medication, and residing on the island of Oahu, as designated by the Hawaii Health Systems Corporation; and

BE IT FURTHER RESOLVED that the issues to be addressed by the Task Force include:

- (1) An inventory of the mental health professional workforce available in the State;
- (2) The distribution of that workforce, with particular attention to the neighbor islands and rural areas of Hawaii; and
- (3) The means by which access to mental health care by those professionals, including physicians, such as primary care physicians and psychiatrists, physician extenders, such as advanced practice nurse practitioners and physician assistants, allied mental health professionals, such as social workers, marriage and family therapists, mental health counselors, psychologists, and spiritual healers, may be improved; and

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2	BE IT FURTHER RESOLVED that no later than September 1, 2015, the Auditor is requested to complete and submit to the									
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4		Task Force a mental health workforce assessment of mental health								
5		professionals and mental health facilities in Hawaii to identify								
6 7	Shortages	anu	determine how those shortages can be reduced; and							
8	ים סס	מוזים יו	MHED DECOLVED that the Auditor is requested to							
9	BE IT FURTHER RESOLVED that the Auditor is requested to include in the assessment, information on professionals who are									
10	qualified to prescribe medications used to treat mental illness,									
11	including psychotropic and anti-psychotic medications; and									
12	Incluaring	poye	notiopie and and psychotic meateactons, and							
13	BE T	אנוק יו	THER RESOLVED that the Legislature requests that							
14			lth workforce assessment include:							
15		_								
16	(1)	The	estimated number and geographic dispersion of the							
17		foll	owing mental health professionals currently							
18		located and practicing in the State:								
19										
20		(A)	Psychiatrists;							
21										
22		(B)	Psychologists, Ph.D.;							
23		(0)	Developing Day D							
24		(C)	Psychologists, Psy.D.;							
25 26		(D)	Advanced practice psychiatric nurses;							
27		(1)	Advanced practice payoniative narros,							
28		(E)	Licensed clinical social workers;							
29		(_/								
30		(F)	Mental health counselors;							
31										
32		(G)	Marriage and family therapists;							
33										
34		(H)	Substance abuse counselors; and							
35										
36		(I)	Other licensed and unlicensed individuals who							
37			provide mental health care; and							
38	(0)	m1	actions and number of university students in the							
39	(2)		estimated number of university students in the e who studied the mental health subjects of							
40			hiatry, psychology, clinical mental health							
41 42			seling, human services, social work, nursing, and							
44		COur	serring, muman services, social work, mursing, and							

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1 2 3		marriage and family therapy, and who graduated with one of the following degrees from an undergraduate or graduate program in Hawaii:				
4 5		(A)	Bachelor's;			
6 7		(B)	Master's;			
8 9		(C)	Doctorate, M.D., D.O., and N.D.;			
10 11		(D)	Doctorate, Ph.D.;			
12 13		(E)	Doctorate, Psy.D.; and			
14 15		(F)	Other degrees associated with mental health care			
16		(- /	and			
17 18 19	(3)		name and location of the following mental health lities located in Hawaii:			
20 21		(A)	Long-term care facilitation units, "closed";			
22 23		(B)	Medium-term care facilitation units;			
24 25		(C)	"Open" units;			
26 27		(D)	Juvenile wards;			
28 29		(E)	Out-patient clinics;			
30 31		(F)	Halfway houses; and			
32 33 34		(G)	Other facilities providing mental health care; and			
35 36 37		_	THER RESOLVED that the Task Force is requested to to of its findings and recommendations, including			
38 39	any proposed legislation, to the Legislature no later than twenty days prior to the convening of the Regular Session of					

2016; and

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BE IT FURTHER RESOLVED that certified copies of this 1 Concurrent Resolution be transmitted to the Auditor, Director of 2 Commerce and Consumer Affairs, Director of Health, Director of 3 Human Services, Insurance Commissioner, Deputy Director of the 4 Corrections Division of the Department of Public Safety, 5 Chairperson of the Department of Psychiatry of the University of 6 Hawaii at Manoa, Chairperson of the Department of Psychology of 7 the University of Hawaii at Manoa, Chairperson of the Department 8 of Psychology of the University of Hawaii at Hilo, Dean of the 9 Daniel K. Inouye College of Pharmacy at the University of Hawaii 10 at Hilo, Dean of the School of Nursing and Dental Hygiene of the 11 University of Hawaii at Manoa, Chairperson of the Senate 12 Committee on Health, Chairperson of the House Committee on 13 Health, Chairperson of the Senate Committee on Commerce and 14 Consumer Protection, Chairperson of the House Committee on 15 Consumer Protection and Commerce, Chairperson of the Senate 16 Committee on Higher Education and the Arts, Chairperson of the 17 House Committee on Higher Education, Chairperson of the Board of 18 Naturopathic Medicine, Chairperson of the Board of Directors of 19 the Hawaii Health Systems Corporation, Chairperson of the Hawaii 20 Medical Board, Chief Executive Officer of Hawaii Medical 21 Services Association, Chairperson of the Board of Directors of 22 the Hawaii Primary Care Association, President of Kaiser 23 Permanente (Hawaii), and Chief of Psychiatry at Tripler Army 24 25 Medical Center.

OFFERED BY: Kichael hugan

MAR 1 3 2015